
CHAPTER 8

SERVICE AUTHORIZATION SCREEN

SERVICE AUTHORIZATION SCREEN

JEFFERSON Co. Service Tracking, Accounting, & Claiming System - ...

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

PO # **993727367** PO Status **A** Authorization Begins **9/23/1999** Ends **9/30/1999**

Provider Type **M** Provider **BOYD SCHOOL** Contract # **143**

Case # **999999** Recipient **Test, Testy T** Worker **TEST**

Billing Medicaid # Billing Name . Comments

EPSTD Provider Medicaid Status EA Status EA End Date

Done Delete Service

SIC **3** LGFS Fund **JE2/SW24000E** Object Code **8203** Freedom Of Choice **Y**


ServSubCat **IND-FS-Family Preservatr** Units Authorized **5** Cost Per Unit **\$0.00**

	SIC	RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost
1	3		JE2/SW24000E	8203	Individual Family Support	Y	5	\$0.00	\$0.00
2	5		JE2/SW24000E	8205	Individual Basic Living Skills	Y	18	\$0.00	\$0.00
3	7		JE2/SW24000E	8207	Mental Health Consultation	Y	5	\$0.00	\$0.00
4	11		JE2/SW24000E	8211	Individual Counseling or Psycho	Y	3	\$0.00	\$0.00
5	19		JE2/SW24000E	8219	Crisis Intervention	Y	1	\$0.00	\$0.00
5 Service(s)									\$0.00

The Service Authorization screen is a Purchase Order form that may be used for the following purposes:

- to create a new Purchase Order for services
- to edit an existing Purchase Order

At the STAC Main Menu, press on Button 2 to create or to view an existing Service Authorization form (1878). Service Authorizations will appear in chronological order, according to their Purchase Order numbers. With the cursor in the PO Number field, use the arrows at the top right side of the screen to scroll through Purchase Orders that have already been entered or press **Page Up** and/or **Page Down** on the keyboard.

NOTE: To locate a purchase order for a case having several purchase orders, click on Record in the tool bar and then click on **Locate Next** . Select Case # as the field in the Locate value box. All purchase orders associated with that particular case can be accessed one by one. The **F12** key can also be used. See page 13 for instructions.

CREATING A SERVICE AUTHORIZATION

Creating a Service Authorization

To create a new Purchase Order (1878), click on **Add 1878** button. Notice that the **Add 1878** button disappears. This button will re-appear when you click on the **Done** button. The next Purchase Order # will appear in the PO # field. The Status will be A (Active) and the remainder of the fields will be blank. The cursor will automatically tab to the Authorization Begins field.

SIC	RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost

Type in the Authorization Begins date. Press **Tab** or **Enter**. NOTE: All dates entered in fields in STAC should be entered in the MM/DD/YYYY format except for the service delivery date on the Service Billing Information screen which should be entered in the MM/DD/YY format. The zero must be typed in front of a month or day consisting of one digit. (For example, September 8, 1996, would be entered as 09081996.) Dividers between month, day, and year are inserted automatically.

The system will automatically calculate an end date to be 90 days after the begin date or the end of the fiscal year if less than 90 days from the begin date. Type over the end date if it needs to be changed. Note that STAC will not allow a Purchase Order to cross over the fiscal year. Press **Tab** or **Enter**.

NOTE: Please check the Service Authorization Ends date carefully before leaving the field since this date (the year) becomes part of the Purchase Order #.

At this point, the system will alter the Purchase Order #, showing the last two digits of the Fiscal Year in which the Service Authorization ends, followed by the county number, and then the Purchase Order number. (Compare the PO# on page 44 with the PO# shown on page 45.)

Place the cursor in the Provider Type field. Notice that the Provider Type defaults to whatever the last Provider Type was. Most of the time this will be “V”. To select another provider type, click on the drop down arrow to the right of the window. The types of providers and descriptions are listed below.

- L - Local contract
- S - State contract
- M - Local contract paid for by State funds
- V - Vendor

Click on the correct Provider Type. Press **Tab** or **Enter**.

NOTE: There are no E type providers (DHR employees), since an 1878 is not necessary to authorize In-House services.

NOTE: When you right click your mouse button make sure your cursor is in the field that is highlighted.

JEFFERSON Co. Service Tracking, Accounting, & Claiming System -...

File Edit Record Window Help

Main Menu Print 1878 Undo InActivate Delete 1878

PO # 27404 PO Status A Authorization Begins 10/31/2000 Ends 1/28/2001

Provider Type V Provider Contract #

Case # Recipient Worker

Billing Medicaid # Billing Name Comments

EPSDT Provider Medicaid Status EA Status EA End Date

Done Delete Service

SIC LGFS Fund Object Code Freedom Of Choice

ServSubCat Units Authorized Cost Per Unit

SIC RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost

0 Service(s)

Right Click or Ctrl-Spacebar to SELECT a PROVIDER Edit

NOTE: A shortcut to a particular provider is to place your cursor in the Provider field, then right click the mouse button to get the “**Select A Provider**” box and then type the first letter of the provider name (you can type up to three letters). The “Select A Provider” box will display provider names that begin with the letter/letters chosen.

JEFFERSON Co. Service Tracking, Accounting, & Claiming System - ...

File Edit Record Window Help

Main Menu Print 1878 Undo InActivate Delete 1878

PO #: 27404 PO Status: A Authorization Begins 10/31/2000 Ends 1/28/2001

Provider: Case: Billing: EPS: Done: SIC: ServSi: SIC I:


Select a provider by Typing the providers Name, Tax ID o...

Quick Locate

Provider Name	Sfx	Type	Tax ID #	Medicaid #
A&B DAYCARE	01	✓		
A.G. GASTON	02	✓		
ABANK'S MORTUARY	01	✓		
ABC DAY CARE	01	✓		
ACTIVE AD INC	01	✓		
ADAMS EYE CARE	1	✓		

Cancel OK

0 Service(s)

Use up and down arrow keys to highlight the correct provider or click on the scroll bar until the help box displays the correct provider. The Magnifying Glass  in the help box (at the top of the screen) may also be used to find a particular Provider Name. Click on the correct provider, and then click **OK**.

The Provider Name ,Type, and MPN (Medicaid Number) will be displayed. If the provider is also a contractor, the Contract number may be displayed. If there is no Contract number or MPN displayed, they may not be typed in on this screen. (For more information on contracts, see Contract chapter.)

NOTE: The Contract number and MPN must be entered on the Provider Utility Screen. Please see Utilities Chapter, page 27, for instructions on data entry.

The cursor has now moved to the Case # field. **Right Click** to display the “Select Case #” help box.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

Press ENTER to continue search, or Type another PO# 27404

PO #: 27404 PO Status: A Authorization Begins 10/31/2000 Ends 1/28/2001

Provid Case Billing EPS Don SIC ServS SIC

Select Case# by Typing the Case #, Client ID or Last Name

Quick Locate

Case #	Open Dt	FI	Client ID #	Last Name	F Name	DOB	Act
0	01/03/1997	A	000-222-22-2222-2	Girp	Geranium		<input checked="" type="checkbox"/>
0	01/03/1997	C	000-878-78-7878-7	Test II	Testy		<input checked="" type="checkbox"/>
0	01/03/1997	A	123-455-67-6556-7	Brideau	Richard		<input checked="" type="checkbox"/>
0	01/03/1997	C	222-222-22-2222-2	Girdy	Gertrude		<input checked="" type="checkbox"/>
1	01/03/1997	A	000-000-00-0001-0				<input checked="" type="checkbox"/>
2	01/03/1997	A	000-000-00-0002-0				<input checked="" type="checkbox"/>
3	01/03/1997	A	000-000-00-0003-0	PRE-ILP GROUP	COMPASS		<input checked="" type="checkbox"/>

Cancel OK

0 Service(s)

NOTE: At this point you are selecting the **Service Recipient** when you select the case number. The Recipient and Billing Name do not have to be the same. A parent can receive services under a child’s Medicaid number if the services have been listed in the ISP.

Use up and down arrow keys to highlight the correct Case # or click on the scroll bar until the help box displays the correct Case # and service recipient. Click on the correct Case # if it is not highlighted. Click **OK**. The selected Case # and Recipient name will now be displayed in their respective fields.

NOTE: Services may only be authorized for one recipient per 1878.

When the case and recipient sections are completed, the cursor will appear in the Billing Medicaid #/SSN field.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

Press ENTER to continue search, or Type another PO# 27404

PO # 27404 PO Status A Authorization Begins 10/31/2000 Ends 1/28/2001

Provider Type V Provider Sample Provider Name Contract # 999999999

Case # 0 Recipient Test II, Testy C Worker WORKER

Billing Medicaid # Billing Name Comments

EPSDT Provider Medicaid Status EA Status EA End Date

Done Delete Service

SIC LGFS Fund Object Code Freedom Of Choice

ServSubCat Units Authorized Cost Per Unit

SIC RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost

0 Service(s)

Right Click or Ctrl-Spacebar to SELECT a BILLING NAME Edit Locked

Right Click to display the Select Billing Individual help box.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

Press ENTER to continue search, or Type another PO# 27404

PO # 27404 PO Status A Authorization Begins 10/31/2000 Ends 1/28/2001

Provider Type V Provider Sample Provider Name Contract # 999999999

Case # Select a Billing Name by typing the Last Name, SSN or ...

Last Name	First Name	Medicaid #	Case #	Open Dt	FI	Act
Girp	Geranium	000-222-22-2222-2	0	01/03/1997	A	<input checked="" type="checkbox"/>
Test II	Testy	000-878-78-7878-7	0	01/03/1997	C	<input checked="" type="checkbox"/>
Brideau	Richard	123-455-67-6556-7	0	01/03/1997	A	<input checked="" type="checkbox"/>
Girdy	Gertrude	222-222-22-2222-2	0	01/03/1997	C	<input checked="" type="checkbox"/>

Cancel OK

SIC Rho Service(s)

You can locate a “Billing Name” the following ways:

- Use up and down arrow keys to highlight the correct “Billing Name”,
- Click on the scroll bar until the help box displays the correct “Billing Name”.
- Use the Looking Glass to locate the correct “Billing Name. (See page 32 for instructions)
- Click on the correct “Billing Name” if it is not highlighted. Then click **OK**.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

Press ENTER to continue search, or Type another PO# 27404

PO #: 27404 PO Status: A Authorization Begins 10/31/2000 Ends 1/28/2001

Provider Type: V Provider: Sample Provider Name Contract #: 999999999

Case #: 0 Recipient: Test II, Testy Worker: WORKER

Billing Medicaid #: 000-222-22-2222-2 Billing Name: Girp, Geranium G Comments

EPSDT Provider: 123456 Medicaid Status: Y EA Status: Y EA End Date: 1/1/1999

Done Delete Service

SIC LGFS Fund Object Code Freedom Of Choice

ServSubCat Units Authorized Cost Per Unit

SIC	RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost

0 Service(s)

Press Ctrl+Spacebar for lookup help. Edit

The Billing Name and the Billing Medicaid #/SSN fields will be automatically completed.

NOTE: The service recipient may not always be the name under which the service is billed. DHR may only claim Medicaid reimbursement for rehabilitative services provided to or on behalf of a child in a child welfare case. If family counseling or family support is provided to the parent or “primary adult” and if a child(ren) in the case receives Medicaid, then the Billing Medicaid Number selected for this service should be the child’s Medicaid Number (For further information, refer to the MaxPak manual.) STAC selects object codes for LGFS based on the service, the recipient, and eligibility status of the recipient. The Month End Rehab report will pull the payment to claim Medicaid reimbursement under the Billing Medicaid Number and Billing Name.

NOTE: If the Medicaid Participant Number (MPN) for the provider is not present, the Month End report will not pull the payment for Medicaid reimbursement even if the service is a Rehab Service and the Billing Name has a Medicaid Billing Number.

The EPSDT Screening provider number, EA Status, and Medicaid Status will be displayed in the gray section of the screen. This information is entered on the Case/Client Data screen (#1) at the time the individual is registered in the system. If an EPSDT Screening referral is done later to lift caps for mental health Rehab services, or if Medicaid eligibility status changes, follow the editing procedures on page 39.

The cursor should now be in the Service Internal Code (SIC) field. **Right click the mouse** to display the Service Code Lookup Help box.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

Press ENTER to continue search, or Type another PO# 27404

PO #: 27404 PO Status: A Authorization Begins: 10/31/2000 Ends: 1/28/2001

Provider Type: V Case #: Billing Medicaid #: EPSDT Provider: Done

SIC: LGFS F ServSubCat: SIC RHB: LGFS A

Lookup Help

SEF	Service	Service Z	Service Description
1	1	Z5227	Intake Evaluation
2	2	Z5242	Treatment Plan Review
3	3	Z5238	Individual Family Support
4	4	Z5239	Group Family Support
5	5	Z5236	Individual Basic Living Skills
6	6	Z5237	Group Basic Living Skills
7	7	Z5243	Mental Health Consultation

OK Cancel Help

1 Service(s)

Inserting record for data entry. Edit Locked

The codes are numerically listed by Service Flex code.

NOTE: Do not key in this field. Always right click the mouse.

See next two pages for a complete listing of the Service Code table.

Use up and down arrow keys to highlight the correct Service Code or click on the scroll bar until the help box displays the correct Service code. Click on the correct Service Code if it is not highlighted. Click **OK**.

NOTE: It is extremely important that the correct service is selected. The following two pages list the forty-five service internal codes with a service description of each SIC and the LGFS object code. SICs 1-20 are mental health rehabilitative services and are described in the MaxPak Manual and in the Medicaid Provider Manual for Rehabilitative Services. A definition of the remaining SICs may be found on page 57. SIC code 25, “Other”, should be used only when none of the other categories describes the service being authorized. When “Other” is used, the comments section of the 1878 must contain an explanation.

LGFS AND STAC OBJECT CODES

Service Internal Code	Z Code	Service Description	E.A. Object	Medicaid Object	Regular Object
1	Z5227	Intake Evaluation	7201	8201	6201
2	Z5242	Treatment Plan Review	7202	8202	6202
3	Z5238	Individual Family Support	7203	8203	6203
4	Z5239	Group Family Support	7204	8204	6204
5	Z5236	Individual Basic Living Skills	7205	8205	6205
6	Z5237	Group Basic Living Skills	7206	8206	6206
7	Z5243	Mental Health Consultation	7207	8207	6207
8	Z5244	In-Home Intervention	7208	8208	6208
9	Z5228	Physician Medical Assessment & Treatment	7209	8209	6209
10	Z5229	Diagnostic Testing	7210	8210	6210
11	Z5231	Individual Counseling or Psychotherapy	7211	8211	6211
12	Z5232	Family Counseling or Psychotherapy	7212	8212	6212
13	Z5233	Group Counseling or Psychotherapy	7213	8213	6213
14	H5060ZC	Child/Adolescent Day Treatment-3 hours	7214	8214	6214
15	H5060ZF	Child/Adolescent Day Treatment-4 hours	7215	8215	6215
16	Z5240	Mental Illness Day Hospitalization	7216	8216	6216
17	Z5234	Medication Administration	7217	8217	6217
18	Z5235	Medication Monitoring	7218	8218	6218
19	Z5230	Crisis Intervention	7219	8219	6219
20	H5030	Prehospitalization Screening	7220	8220	6220
21		Medical Trt/Hospital	7102		6102
22		Rent/Mortgage	7103		6103
23		Transportation	7104		6104
24		Drug Screening	7105		6105
25		Other	7106		6106
26		Daycare	7107		6107
27		Utilities	7002		6108
28		Therapeutic Foster Care	7004	8004	6109
29		Other Types of Placement	7005	8005	6110
30		Baby Products	7006		6111
31		Education	7007		6112
32		Clothes/Shoes	7008		6113
33		Food	7010		6114
34		Household Items	7012		6115
35		Identification	7013		6116
36		Medication	7014		6117
37		Personal Hygiene Products	7015		6118
38		Recreation	7018		6119
39		Contract Start-Up Fees	7022		6120
40		Other Contract Costs	7023		6121

41	GPS Training		6122
42	Gifts		6123
43	Sitter Service	7024	6124
44	Optical	7025	6125
45	Personal Grooming		6126

NOTE: There are now EA codes for Sitter Service and Optical.

DESCRIPTION OF SERVICE INTERNAL CODES 21-45

SIC #	SERVICE	DESCRIPTION
21	Medical Treatment/Hospital	Payments for visits and/or treatments from a MD, Dentist, or other medical services providers, including hospitals and nursing homes
22	Rent/Mortgage	Payments to landlords, housing authorities, apartments, trailer parks, mortgage companies
23	Transportation	Payments to/for individuals who transport clients, gasoline, bus tickets, bus passes, taxi companies, airline fares
24	Drug Screening	Payments to labs or hospitals for drug screening
25	Other	Payments for any items or services not listed in SICs 1-45. Explain in "Comments" on 1878.
26	Daycare	Payments to individuals or businesses to provide daycare for clients
27	Utilities	Payments for electricity, natural gas, propane gas, water, sewage, telephone
28	Therapeutic Foster Care	Intensive foster care for children with special needs
29	Other Types of Placement	Residential care, difficulty of care payments (not Foster Care)
30	Baby Products	Payments for baby clothes, formula, bedding, wipes, food
31	Education	Payments for school fees, books, supplies, tuition, registration fees
32	Clothes/Shoes	Self-explanatory
33	Food	Self-explanatory
34	Household Items	Payments for bed linens, towels, cleaning supplies
35	Identification	Payments for birth certificates, non-driver ID
36	Medication	Payments for prescription drugs, over-the-counter medicines
37	Personal Hygiene Products	Payments for shampoo, deodorant, hair products, soap
38	Recreation	Payments for school or other trips, camp, karate, voice, music lessons, musical instrument rental
39	Contract Start-up Fees	Self-explanatory
40	Contract Costs	Self-explanatory
41	GPS Training	
42	Gifts	For DHR foster children and protective service cases
43	Sitter Service	
44	Optical	
45	Personal Grooming	

JEFFERSON Co. Service Tracking, Accounting, & Claiming System

File Edit Record Window Help

1878 Undo InActivate Delete 1878

Description

IND-FS-Ed Advocacy
IND-FS-Family Preservatn
IND-FS-Hme Inst-Sub Abuse
IND-FS-Home Health Care
IND-FS-Language Interpret
IND-FS-Parenting Support
IND-FS-Respite Care
IND-FS-Sub Abuse Cnt JF
IND-FS-School Success
IND-FS-Thrptc Visit Supp

servsubcat

Status A Authorization Begins 10/31/2000 Ends 1/28/2001
Sample Provider Name Contract # 999999999
Test II, Testy C Worker WORKER
-2222-2 Billing Name Girp, Geranium G Comments
Medicaid Status Y EA Status Y EA End Date 1/1/1999
Delete Service
Object Code Freedom Of Choice
Units Authorized Cost Per Unit

SIC	RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost
1	1	JE2/SW200000	8201	Intake Evaluation	Y	1	\$10.00	\$10.00
2 Service(s)								\$10.00

Edit Locked Field

As shown above, a Description Box will appear if one of the following Medicaid Rehab services is selected:

- Service 3 - Individual Family Support
- Service 4 - Group Family Support
- Service 5 - Individual Basic Living Skills
- Service 6 - Group Basic Living Skills

Select the Subcategory of the chosen service by clicking on the description. If more than one Subcategory is chosen, authorize each Subcategory on a separate line, for example, 20 units of respite care on one line and 4 units of educational advocacy on another line, even though both are Family Support services.

The next page shows a listing of the subcategories for the four services above, SICs 3-6.

SERVICE SUBCATEGORIES FOR FAMILY SUPPORT AND BASIC LIVING SKILLS

Service Code Z5236	Individual Basic Living Skills	SUBCATEGORIES Behavior Support Behavior Treatment Activity Behavioral Management Behavioral Specialist Coaching Individual Coaching (Behavior) Recreational Therapeutic Activity Tutoring Vocational Assistance for Adolescents
Service Code Z5237	Group Basic Living Skills	SUBCATEGORIES Same as for Individual BLS (See list above.)
Service Code Z5238	Individual Family Support	SUBCATEGORIES Educational Advocacy Family Preservation Services Home Instrctn-Sub.Abusing Fam.Members Home Based Health Care Language Interpretation-Foreign or Sign Parenting Support Respite Care Substance Abuse Support Supp. to Families-Encourage School Success Therapeutic Visitation Support
Service Code Z5239	Group Family Support	SUBCATEGORIES Same as for Individual FS (See list above.)

After clicking on the correct Subcategory, the Service Subcategory and the Object Code fields will be automatically completed. The cursor will now be positioned in the LGFS Fund field.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

Press ENTER to continue search, or Type another PO# 27404

PO # 27404 PO Status A Authorization Begins 10/31/2000 Ends 1/28/2001

Provider Type V Provider Sample Provider Name Contract # 999999999

Case # 0 Recipient Test II, Testy Worker WORKER

Billing Medicaid # 000-222-22-2222-2 Billing Name Girp. Geranium G Comments

EPSTD Provider 123456 Medicaid Status Y EA Status Y EA End Date 1/1/1999

Done Delete Service

SIC 1 LGFS Fund Object Code 8201 Freedom Of Choice

ServSubCat Units Authorized Cost Per Unit

SIC	RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost

1 Service(s)

Dollars remaining Edit Locked

Right Mouse Click to view the LGFS Account Look up box. Highlight the correct LGFS Account and click on OK.

The screenshot shows the 'Paradox - [Service Authorization Screen]' window. A 'Lookup Help' dialog box is open, displaying a list of LGFS accounts. The dialog box has a title bar with a close button (X). The list has three columns: 'LGFS CODE', 'LGFS Fund/Subledger', and 'Description'. The first item is highlighted.

LGFS CODE	LGFS Fund/Subledger	Description
1	JE2/JE241000	Family to Family Fle
2	JE2/JE242000	FAMILY TO FAMILY,
3	JE2/JE243000	FAMILY TO FAMILY,
4	JE2/JE430200	DUFFLE BAGS
5	JE2/SW200000	Medication
6	JE2/SW213000	ILP
7	JE2/SW240000	Local RC Flex-funds
8	JE2/SW24000B	Flex Funds - Bessen

Below the list are three buttons: 'OK', 'Cancel', and 'Help'. The background window shows fields for 'PO # 27404', 'PO Status A', 'Authorization Begins 10/31/2000', 'Ends 1/28/2001', and 'Provider Type V'. There is also a 'Main Menu' button and a 'Print 1878' button.

The cursor automatically goes to the Units Authorized Field. Type in the number of units authorized. Press **Tab** or **Enter**.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

PO #: 27404 PO Status: A Authorization Begins: 10/31/2000 Ends: 1/28/2001

Provider Type: V Provider: Sample Provider Name Contract #: 999999999

Case #: 0 Recipient: Test II, Testy C Worker: WORKER

Billing Medicaid #: 000-222-22-2222-2 Billing Name: Girp, Geranium G Comments

EPSDT Provider: 123456 Medicaid Status: Y EA Status: Y EA End Date: 1/1/1999

Done Delete Service

SIC: 1 LGFS Fund: JE2/SW200000 Object Code: 8201 Freedom Of Choice

ServSubCat: Units Authorized: Cost Per Unit:

SIC	RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost

1 Service(s)

Description: Edit Locked

The cursor is now in the Cost per Unit field. Type in the Cost per Unit for the service authorized. Press **Tab** or **Enter** and Total Cost will automatically be displayed.

Paradox - [Service Authorization Screen]

File Edit Record Window Help

Main Menu Print 1878 Add 1878 Undo InActivate Delete 1878

PO # 27404 PO Status A Authorization Begins 10/31/2000 Ends 1/28/2001

Provider Type V Provider Sample Provider Name Contract # 999999999

Case # 0 Recipient Test II, Testy C Worker WORKER

Billing Medicaid # 000-222-22-2222-2 Billing Name Garp, Geranium G Comments

EPSDT Provider 123456 Medicaid Status Y EA Status Y EA End Date 1/1/1999

Done Delete Service

SIC 1 LGFS Fund JE2/SW200000 Object Code 8201 Freedom Of Choice

ServSubCat Units Authorized 1 Cost Per Unit \$10.00

SIC RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost

1 Service(s) \$10.00

1 of 1 [-STAC-SERVICES.DB] Edit Locked

The cursor is now on the Freedom of Choice field. Type in “Y” or “N”...

NOTE: Yes, (Y), is the default.

If the client has chosen, or agreed with referral to the above named Provider for the Medicaid rehabilitative services to be authorized, the Freedom of Choice Field should be coded with a “Y”. Freedom of Choice requirements apply only if the services are Medicaid rehabilitative services (SIC codes 1-20), the child is covered by Medicaid, and the child is not in DHR custody.

If the client did not choose or agree with referral to the above named Provider, then the Freedom of Choice Field should be coded with a “N”.

“Y’s” will be pulled on the End of Month Rehab Reports.

“N’s” will be excluded from the End of Month Rehab Reports, because DHR cannot bill Medicaid for Services provided when the client/family did not choose the Provider.

Press **Tab** or **Enter**.

After the Freedom of Choice Field has been completed, the data entry section of the screen will be emptied, and the information previously entered will be transferred to the table section of the screen.

The screenshot shows the 'Paradox - [Service Authorization Screen]' window. It contains several data entry fields and a table of services.

Data Entry Fields:

- PO #: 27404
- PO Status: A
- Authorization Begins: 10/31/2000
- Ends: 1/28/2001
- Provider Type: V
- Provider: Sample Provider Name
- Contract #: 999999999
- Case #: 0
- Recipient: Test II, Testy
- Worker: WORKER
- Billing Medicaid #: 000-222-22-2222-2
- Billing Name: Girp, Geranium G
- Comments: (empty)
- EPSDT Provider: 123456
- Medicaid Status: Y
- EA Status: Y
- EA End Date: 1/1/1999

Buttons: Main Menu, Print 1878, Add 1878, Undo, InActivate, Delete 1878, Done, Delete Service.

Fields: SIC (blank), LGFS Fund, Object Code, Freedom Of Choice, ServSubCat, Units Authorized, Cost Per Unit.

Table:

SIC	RHB	LGFS Account	Obj	Service Description	FOC	Units Auth	Unit Cost	Total Cost
1	1	JE2/SW200000	8201	Intake Evaluation	Y	1	\$10.00	\$10.00
2 Service(s)								
								\$10.00

Footer: Press Ctrl+Spacebar for lookup help. Edit Locked

Continue adding services as needed by completing the data entry section of the screen and tabbing off the Freedom of Choice Field as each service entry is completed. After tabbing off the Freedom of Choice Field your cursor will return to the SIC Field each time. This field should be blank and you should be able to continue adding lines of service as needed.

To print the Service Authorization (1878), click on **Done**, and then click on **Print 1878**. See page 68 for an example of the Service Authorization/Purchase Order (1878).

Click on the **Main Menu** to return to the main menu.

EDITING THE SERVICE AUTHORIZATION

With the cursor highlighting the Service Internal Code window, press **F9** if not already in the edit mode. Use the arrow buttons in the middle right side of the screen (next to the EA Status window), or press **Page Up** and **Page Down** keys to scroll through the services to get to the service that needs to be edited. You can also use the mouse to left click on the line of service that needs editing, then click in the SIC code box. Tab to the field or fields and overwrite the incorrect information. When all edits have been made, click on the **Done** button.

If another service needs to be entered on the same Service Authorization, place the cursor in the Service Internal code window, press **F9**, and then press the **Insert** key on the keyboard. Right click on the Mouse button and select SIC code. Continue with data entry procedures for adding a service to the Service Authorization. Be sure to click on the **Done** button when completed.

Whenever an active service authorization is edited during the time it is in effect, print the new purchase order, and staple it to the original one for audit trail purposes. The STAC tables will indicate the date and name of the user who edited the 1878.

NOTE: The STAC system now has an edit that will not allow Purchase Orders to cross fiscal years.

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ADDING COMMENTS

Comments may be added by pressing the Comments button found to the right of the Billing Name field. The Comments Box may be used to add additional information regarding the case or provision of services for the provider. When finished, Print 1878. Whenever SIC 25 “Other” is used, the comments section must be used to explain “other”. (See example of the 1878 on page 68.)

INACTIVATING A SERVICE AUTHORIZATION

A Service Authorization may be inactivated after the End Date has expired if all bills have been paid against it. Click on the InActivate button, and an I for Inactive will appear in the PO Status field. (Or place cursor in PO Status field, press F9, and type in an I for inactive.)

DELETING A SERVICE

Place cursor in Service Internal Code field, click on the arrows until the correct service record is displayed and press Delete Service button. You will then see a “Please confirm box” showing the information on the services you wish to delete. If you select yes, this will delete the line of service. Click on the Done button. You can also pull up the service you wish to delete by placing the cursor on the line of service on the ledger sheet. This will pull the service up and allow you to delete it.

NOTE: A service cannot be deleted if a payment has been made against it.

SAMPLE OF SERVICE AUTHORIZATION (1878)

P.O.#:
993727367

JEFFERSON CO. DEPARTMENT OF HUMAN RESOURCES
SERVICE AUTHORIZATION / PURCHASE ORDER

Case #:
999999

Service Recipient: **Testy T Test**
Family Indicator: **A**

Service Rcpt. ID #:
000-121-21-2121-

Provider
Of
Services:

BOYD SCHOOL
P O BOX 127
GREEN POND, AL 35074

Type: **M** Provider MPN#:
Provider Tax ID: **630692960**
EA Status: **Y** until **1/1/1999**

Svc.#	Z Code	FOC	Obj. Code	LGFS Acct	Service Description	Units Auth.	Cost/Unit	Max Cost
1	Z5238	Y	7203	JE2/SW24000E	Individual Family Support	5	\$10.00	\$50.00
2	Z5236	Y	7205	JE2/SW24000E	Individual Basic Living Skills	18	\$20.00	\$360.00
3	Z5243	Y	7207	JE2/SW24000E	Mental Health Consultation	5	\$35.00	\$175.00
4	Z5231	Y	7211	JE2/SW24000E	Individual Counseling or Psycl	3	\$2.50	\$7.50
5	Z5230	Y	7219	JE2/SW24000E	Crisis Intervention	1	\$4.00	\$4.00

Date Services Authorized:
9/23/1999

Date Authorization Ends:
9/30/1999

Total Cost Authorized:
\$596.50

Billing Name: **Testy Test**

Billing #: **000-121-21-2121-**

COMMENTS:

THERAPEUTIC SERVICES FOR SPECIAL NEEDS CHILD.

CNA will pay only for Authorized Services which are delivered in accordance with the case plan, I/P, subplan or pursuant to other DPCS policies or authority which are documented in accordance with requirements of the Medicaid Provider Manual for Rehabilitative Services, if applicable, or other instructions. Individuals are authorized to receive services that are medically necessary for the maximum reduction of physical or mental disability and restoration of the recipient to his/her functional level due to unspecified psychosocial circumstances or DSM-IV diagnosis. Purchase orders are subject to modification or cancellation in the event funds cease to be available or client service needs change.

Worker: **TEST T TEST**

Date

Child/Adolescent Service Professional

Date

Supervisor: **JOHN DOE**

Date

Degreed/License #

Send Bills To:

JEFFERSON CO. DEPARTMENT OF HUMAN RESOURCES
Attn: L'Tanya Blackmon, Acct.
P. O. Box 11926
Birmingham, AL 35202-1926
Phone: (205) 918-5351

Case #: **999999** P.O.#: **993727367**
Date: **11/14/2000** Time: **12:03:22 PM**

DHR/ISD STAC form 1878-966

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CHAPTER 9

CONTRACTS

CONTRACTS

There are two different types of contracts that may be entered on STAC. They include client-specific contracts and non client-specific contracts, which may include costs such as start-up expenses not tied to a particular client.

CLIENT-SPECIFIC CONTRACTS

For contracts which are specific to a particular client, follow the procedures beginning on page 44 for creating a Service Authorization. Be sure to indicate the correct Provider Type to show the contract as **L** (Local contract), **S** (State contract), or **M** (Local contract paid for by State funds). Press **Tab** or **Enter**.

The cursor is now in the Provider field. Right click to display the Select A Provider help box. The Provider Name, type, and MPN (Medicaid Provider Number) may be displayed along with the Contract Number if the Provider is also a contractor.

NOTE: If there is no Contract Number or MPN displayed, the number(s) may not be typed in on this screen. The Contract Number and MPN must be entered in the Provider data screen under Utilities. The Utilities section gives instructions for using the Provider data screen.

Continue with the instructions beginning on page 44 to complete the client specific contract Service Authorization.

NON CLIENT-SPECIFIC CONTRACTS

To be able to enter contract costs, such as start-up expenses, that are not associated with a particular client, set up a “Contract” case which is a dummy case. More than one of these cases may be set up if necessary. The steps in setting up a “Contract” case are listed below:

1. Follow procedures in the Utilities, Chapter 6 page 25, to add a supervisor whose name is “Contract” and whose SSN is a number such as 100-00-0000.
2. Follow procedures in the Utilities, Chapter 6 page 23, to add a worker whose name is “Contract” and whose SSN is a number such as 200-00-0000. Use the “Contract” supervisor SSN for the supervisor number.
3. Follow procedures in the Utilities, Chapter 6 page 27, to add the real contract name such as UMCH Contract# 99-002 as a provider. Remember to include the real contract number in the appropriate field.

Follow procedures beginning on page 35 to add the dummy case whose name is “Contract”. Enter a number such as 1 or 2 for the Case Number. Enter O for other in the Case Type field.

Enter “Contract” in the Case Name field. Right click in the Worker SSN field to choose the worker whose name is “Contract”. Tab through the Address fields. Add a client whose name is “Contract” in the bottom section of the screen. Enter A in the Family Indicator field. Enter N in the Medicaid Status field.

Enter an SSN such as 300-00-000. Enter “Contract” as the last name. All other fields may be left blank.

NOTE: Do not use the same SSN for different contracts.

4. When creating the Service Authorization, use the correct dates for the contract. For example, if you will be paying a contract provider \$500 per month for 6 months for start-up costs, enter the 6 month period beginning date in the Authorization Begins field and the ending date in the End Date field.
5. In the Provider Type field, click on the appropriate provider type for the real contract provider name. In the Provider field, choose the real contract provider name. In the Case # field, choose the dummy case that you set up using “Contract” as the name. In the Billing Medicaid/SSN field, choose the dummy client that you set up using “Contract” as the client name.
6. In the Service Internal Code field choose service number 39 which is Contract Start Fees or service number 40 which is Other Contract Costs. Complete the remaining fields with appropriate information.
7. Billing transactions for these Contract cases should be treated as regular billing transactions and entered on Screen 3.